

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS436AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/28/2009
NAME OF PROVIDER OR SUPPLIER QUALITY GUEST HOME 2		STREET ADDRESS, CITY, STATE, ZIP CODE 3980 PLACITA AVENUE LAS VEGAS, NV 89121		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	<p>Initial Comments</p> <p>Surveyor: 28276 The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted at your facility on 7/28/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility was licensed for five Residential Facility for Group beds for elderly and disabled person and/or persons with mental illness Category I residents. The census at the time of the survey was four. Four resident files were reviewed and three employee files were reviewed. three discharged resident files were reviewed. The facility received a grade of D.</p> <p>The following deficiencies were identified:</p>	Y 000		
Y 072 SS=F	<p>449.196(3) Qualications of Caregiver-Med Training</p> <p>NAC 449.196 3. If a caregiver assists a resident of a residential facility in the administration of any medication, including, without limitation, an over-the-counter medication or dietary supplement, the caregiver must: (a) Receive, in addition to the training required pursuant to NRS 449.037, at least 3 hours of training in the management of medication. The caregiver must receive the training at least every 3 years and provide the residential facility with</p>	Y 072		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 103	Continued From page 2 Based on record review on 7/28/09, the facility failed to ensure 1 of 3 employees complied with NAC 441A.375 regarding tuberculosis testing (Employee #2) for the protection of all residents. Employee #2 did not have evidence of a two-step TB test, or an annual TB test for this year. This was a repeat deficiency from the 9/11/08 State Licensure survey. Severity: 2 Scope: 3	Y 103		
Y 151 SS=C	449.204(1)(b) Insurance NAC 449.204 1. A residential facility shall: (b) Maintain a contract of insurance for protection against liability to third persons in amounts appropriate for the protection of residents, employees, volunteers and visitors to the facility. This Regulation is not met as evidenced by: Surveyor: 28276 Based on interview and observation on 7/28/09, the facility failed to maintain a contract of insurance for the facility on site. Interview with Employee #1 revealed the insurance policy was not kept at the facility. This was a repeat deficiency from the 9/11/08 State Licensure survey. Severity: 1 Scope: 3	Y 151		

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Y 175	Continued From page 3	Y 175		
Y 175 SS=F	<p>449.209(4)(b) Health and Sanitation-Hazards</p> <p>NAC 449.209</p> <p>4. To the extent practicable, the premises of the facility must be kept free from:</p> <p>(b) Hazards, including obstacles that impede the free movement of residents within and outside the facility.</p> <p>This Regulation is not met as evidenced by: Surveyor: 28276</p> <p>Based on observation on 7/28/09, the facility failed to ensure the facility was free of tripping hazards. The flooring changed from linoleum in the family room, hallway and bedrooms to tile in the kitchen and two bathrooms. The facility failed to ensure a transition piece was located between the linoleum and the tile leaving approximately a one inch height difference.</p> <p>Severity: 2 Scope: 3</p>	Y 175		
Y 178 SS=F	<p>449.209(5) Health and Sanitation-Maintain Int/Ext</p> <p>NAC 449.209</p> <p>5. The administrator of a residential facility shall ensure that the premises are clean and that the interior, exterior and landscaping of the facility are well maintained.</p> <p>This Regulation is not met as evidenced by: Surveyor: 28276</p> <p>Based on observation on 7/28/09, the facility failed to ensure the interior premises was well maintained. Linoleum in the kitchen, living room,</p>	Y 178		

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Y 178	Continued From page 4 hallway and bedrooms was pulling away from the wall, and portions were missing. The toilet seat cover in Bathroom #1 was missing, there was mold in the shower in Bathroom #1 and the sliding glass door used for the shower was hard to open. The shower in Bathroom #2 had paint chipping away. Severity: 2 Scope: 3	Y 178		
Y 179 SS=E	449.209(6) Health and Sanitation-Screens NAC 449.209 6. All windows that are capable of being opened in the facility and all doors that are left open to provide ventilation for the facility must be screened to prevent the entry of insects. This Regulation is not met as evidenced by: Surveyor: 28276 Based on observation on 7/28/09, the facility failed to provide screens doors on all of the windows to prevent the entry of insects. (Three windows were missing screens. The window in the family room on the same wall as the front door, the widow in the kitchen that opened into the laundry room, and the widow in the caregiver's bedroom next to the tall gray filing cabinet.) Severity: 2 Scope: 3	Y 179		
Y 223 SS=F	449.213(3) Laundry-Linen - Equipment, Venting NAC 449.213	Y 223		

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Y 223	Continued From page 5 3. The laundry room in a residential facility must be situated in an area which is separate from an area where food is stored, prepared or served. The laundry must be adequate in size for the needs of the facility and maintained in a sanitary manner. The laundry room must contain at least one washer and at least one dryer. All the equipment must be kept in good repair. All dryers must be ventilated to outside the building. If a washer or dryer is located outside the residential facility, the washer or dryer must be in a room or enclosure. This Regulation is not met as evidenced by: Surveyor: 28276 Based on interview and observation on 7/28/09, the facility failed to ensure 1 of 1 dryers was working properly and vented to the outside of the building. The surveyor turned on the dryer and it made a noise at which time Employee #2 stated the dryer was not working properly. Severity: 2 Scope: 3	Y 223		
Y 251 SS=F	449.217(2) Storage of Food-Perishable foods refrigerated NAC 449.217 2. Perishable foods must be refrigerated at a temperature of 40 degrees Fahrenheit or less. Frozen foods must be kept at a temperature of 0 degrees or less.	Y 251		

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Y 251	Continued From page 6 This Regulation is not met as evidenced by: Surveyor: 28276 Based on observation on 7/28/09, the facility failed to ensure refrigerated foods were kept at a temperature of 40 degrees or less, and frozen foods were kept at a temperature of 0 degrees or less. Severity: 2 Scope: 3	Y 251			
Y 300 SS=H	449.218(1) Bedrooms - Size Requirements NAC 449.218 1. A bedroom in a residential facility that is shared by two or three residents must have at least 60 square feet of floor space for each resident who resides in the bedroom. A resident may not share a bedroom with more than two other residents. A bedroom that is occupied by only one resident must have at least 80 square feet of space. This Regulation is not met as evidenced by: Surveyor: 28276 Based on interview and observation on 7/28/09, the facility failed to ensure 2 of 4 residents had at least 60 square feet of floor space in their bedrooms (Resident #2 and #3). Findings include: Residents #2 and #5 resided in Bedroom #1. The bed arrangement in the room was noted during the facility tour. One of the beds completely blocked the entrance into the	Y 300			

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Y 300	Continued From page 7 adjoining bathroom. The second bed blocked most of the opening to the closet. The surveyor measured the room and it was 113 square feet. At least 60 square feet per resident must be provided in a shared bedroom, therefore for two residents, a room would have to be at least 120 square feet. Employee #1 reported during an interview that she knew bedroom #1 was not big enough for two residents. Severity: 3 Scope: 2	Y 300			
Y 859 SS=E	449.274(5) Periodic Physical examination of a resident NAC 449.274 5. Before admission and each year after admission, or more frequently if there is a significant change in the physical condition of a resident, the facility shall obtain the results of a general physical examination of the resident by his physician. The resident must be cared for pursuant to any instructions provided by the resident's physician. This Regulation is not met as evidenced by: Surveyor: 28276 Based on record review on 7/28/09, the facility failed to ensure that 3 of 7 residents received an annual physical (Resident #1, #2 and #5). Resident #1 was admitted 5/1/09, the only physical in the file was dated 4/3/07. Resident #2 was admitted 7/2/08, the only physical in the file was dated 10/14/08. Resident #5 was admitted 12/5/08, no evidence of a physical was in the file.	Y 859			

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Y 859	Continued From page 8 This was a repeat deficiency from the 9/11/08 State Licensure survey. Severity: 2 Scope: 2	Y 859			
Y 878 SS=I	449.2742(6)(a)(1) Medication / Change order NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (a) The caregiver responsible for assisting in the administration of the medication shall: (1) Comply with the order. This Regulation is not met as evidenced by: Surveyor: 28276 Based on record review and interview on 7/28/09, the facility failed to ensure 3 of 4 residents had medications available in the facility so they could receive the medications as prescribed (Resident #1, #2 and #3). Findings include: Resident #2: The resident was prescribed Clonazepam 0.5 milligrams (mg), two tablets by mouth in the morning. The resident did not receive the medication from 7/1/09 through 7/7/09. Resident #2 was able to tell the surveyor	Y 878			

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Y 878	<p>Continued From page 9</p> <p>she was prescribed Clonazepam for anxiety, and that the facility ran out of the medication during the beginning of July. The resident stated the facility tried to contact the pharmacy regarding the medication, but did not receive a response. Resident #2 went to the doctor on 7/7/09 for a tuberculosis test, and while in the clinic, asked the doctor about her prescription for Clonazepam. It was determined the doctor had not submitted the resident's prescription to the pharmacy. Resident #2 stated during the first week of July she was anxious and on two occasions was unable to leave the facility due to anxiety.</p> <p>Resident #1: The resident was prescribed Amlodipine Besylate 10 mg, (for high blood pressure), one tablet in the morning. The resident missed eight doses of the medication from 7/1/09 through 7/8/09.</p> <ul style="list-style-type: none"> - The resident was prescribed Metformin HCL 500 mg (to lower glucose levels in patients with type 2 diabetes), one tablet two times a day. The resident missed 18 doses from 7/1/09 through 7/9/09. - Calcium Citrate + Vitamin D was found with the resident's other medications. The medication was not listed on the medication review dated 6/5/09, and there was no written prescription on site. <p>Resident #3: The resident was prescribed Levothyroxine 125 microgram (mcg), (thyroid hormone) one tablet every day. The resident missed 15 doses from 7/1/09 through 7/15/09.</p> <p>This was a repeat deficiency from the 9/11/08 State Licensure survey.</p> <p>Severity: 3 Scope: 3</p>	Y 878		

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Y 883	Continued From page 10	Y 883		
Y 883 SS=F	449.2742(7) Medication / Resident Refusal NAC 449.2742 7. If a resident refuses, or otherwise misses, and administration of medication, a physician must be notified within 12 hours after the dose is refused or missed. This Regulation is not met as evidenced by: Surveyor: 28276 Based on observation on 7/28/09, the facility failed to ensure a physician was notified for 3 of 3 residents who missed medications. Severity: 2 Scope: 3	Y 883		
Y 885 SS=D	449.2742(9) Medication / Destruction NAC 449.2742 9. If the medication of a resident is discontinued, the expiration date of the medication of a resident has passed, or a resident who has been discharged from the facility does not claim the medication, an employee of a residential facility shall destroy the medication, by an acceptable method of destruction, in the presence of a witness and note the destruction of the medication in the record maintained pursuant to NAC 449.2744. Flushing contents of vials, bottles or other containers into a toilet shall be deemed to be an acceptable method of destruction of medication.	Y 885		

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Y 885	Continued From page 11 This Regulation is not met as evidenced by: Surveyor: 28276 Based on observation and interview on 7/28/09, the facility failed to ensure the medications for 1 of 3 discharged residents were destroyed after the resident left the facility (Resident #7). Severity: 2 Scope: 2	Y 885		
Y 895 SS=C	449.2744(1)(b)(1) Medication / MAR NAC 449.2744 1. The administrator of a residential facility that provides assistance to residents in the administration of medication shall maintain: (b) A record of the medication administered to each resident. The record must include: (1) The type of medication administered; (2) The date and time that the medication was administered; (3) The date and time that a resident refuses, or otherwise misses, an administration of medication; and (4) Instructions for administering the medication to the resident that reflect the current order or prescription of the resident's physician. This Regulation is not met as evidenced by:	Y 895		

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Y 895	Continued From page 12 Surveyor: 28276 Based on record review on 7/28/09, the facility failed to ensure the medication administration record (MAR) was accurate for 4 of 4 residents (Resident #1, #2, #3 and #4). The MAR was signed for 4 of 4 residents for the date of the survey 7/28/09 when the surveyor arrived at 7:45 am. The residents did not receive their medications until approximately 8:00 am. Interview with Resident #3 and Employee #2 revealed the residents and caregivers sign the MARs at night for the evening medications and the morning medications. Severity: 1 Scope: 3	Y 895		
Y 923 SS=F	449.2748(3)(b) Medication Container NAC 449.2748 3. Medication, including, without limitation, any over-the-counter medication or dietary supplement, must be: (b) Kept in its original container until it is administered. This Regulation is not met as evidenced by: Surveyor: 28276 Based on observation on 7/28/09, the facility failed to keep medications belonging to 4 of 4 residents in their original container (Resident #1, #2, #3 and #4).	Y 923		

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Y 923	Continued From page 13 Severity: 2 Scope: 3	Y 923		
Y 944 SS=A	449.2749(2) Resident File - Discharge Documentation NAC 449.2749 2. The document required pursuant to paragraph (j) of subsection 1 must indicate the location to which the resident was transferred or the person in whose care the resident was discharged. If the resident dies while a resident of the facility, the document must include the time and date of the death and the dates on which the person responsible for the resident was contacted to inform him of the death. This Regulation is not met as evidenced by: Surveyor: 28276 Based on record review and interview on 7/28/09, the facility did not provide proper documentation regarding a resident who had had been discharged. This was a repeat deficiency from the 9/11/08 State Licensure survey. Severity: 1 Scope: 1	Y 944		

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